

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Hogan &amp; Hartson Political Action Committee

Full Name (Last, First, Middle Initial)

**A. JOHN SALAZAR FOR CONGRESS**

Mailing Address P.O. Box 534

City  
PuebloState  
COZip Code  
81002

Purpose of Disbursement

Candidate Name  
JOHN TONY SALAZARCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CO District: 03

Transaction ID: SB23.8147

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	9		2	0	0	6

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. KAY BAILEY HUTCHISON FOR SENATE COMMITTEE**Mailing Address P.O. BOX 9190  
800 BRAZOS SUITE 1200City  
DALLASState  
TXZip Code  
75209

Purpose of Disbursement

Candidate Name  
KAY BAILEY HUTCHISONCategory/  
TypeOffice Sought: ☐ House  
☒ Senate  
☐ PresidentDisbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: TX District: 00

Transaction ID: SB23.8130

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	0	6

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. KENNY MARCHANT FOR CONGRESS**

Mailing Address PO BOX 110187

City  
CARROLLTONState  
TXZip Code  
75011

Purpose of Disbursement

Candidate Name  
KENNY MARCHANTCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: TX District: 24

Transaction ID: SB23.8129

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	0	6

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) .....

3000.00

TOTAL This Period (last page this line number only) .....